

Immunization NEWS

Vaccines for Adolescents

New vaccines have recently become available and are recommended in specified groups of adolescents — meningococcal and pertussis vaccines. Three other vaccines (hepatitis, varicella, and measles-mumps-rubella) are recommended for adolescents who did not receive them as children. Immunization has the potential to protect not only the health of adolescents but their friends, families, and communities. Administering vaccines can be easy and inexpensive when delivered as part of a preventive visit to a healthcare provider. For families with health insurance, most of the cost is usually covered. Lower income families may be eligible to get vaccines at no cost through a program called Vaccines For Children (VFC). To learn more about the VFC program, visit the website www.cdc.gov/nip/vfc/Default.htm or contact your state VFC coordinator listed at this web address: www.cdc.gov/nip/vfc/contacts_vfc_coord.htm. For information about adolescent immunizations in NH, contact the NH Immunization Program (NHIP) at **603-271-4482** or **1-800-852-3345 x4482**.

Vaccines and the Diseases they Prevent

Immunizations can prevent many of the diseases that pose serious threats to adolescents. Some adolescents with specific health risks may need additional vaccines such as hepatitis A, influenza, and pneumococcal.

Pertussis (Whooping cough)

- Highly contagious with prolonged cough. If transmitted to infants, may be life-threatening.
- **NEW VACCINE:** Tetanus-diphtheria-acellular pertussis vaccine (Tdap) adds pertussis disease protection while maintaining tetanus and diphtheria protection.
- Adolescents 11–18 years of age should receive a single shot of Tdap. Adolescents who received tetanus-diphtheria booster (Td) should receive Tdap 5 years after they received Td.

Meningococcal Infections

- Extremely serious disease that can rapidly progress to meningitis, pneumonia, and death.
- **NEW VACCINE:** Meningococcal conjugate vaccine (MCV4) provides protection against these infections.
- Adolescents should receive a single dose of this vaccine during their 11–12 year old check-up or when they enter high school or college (if living in a dorm).

Hepatitis B

- Can cause different kinds of liver disease, including cancer.
- Adolescents who did not receive the hepatitis B vaccine during childhood should receive the three-dose series of this vaccine.

Varicella (Chickenpox)

- Highly contagious and can be a serious and sometimes life-threatening disease.
- Adolescents who have not had chickenpox or two doses of the vaccine should receive this vaccine at their 11–12 year old check-up. If anyone is uncertain about having had the disease, a blood test can determine immunity.

Measles, Mumps and Rubella

- Historically among the most serious vaccine-preventable diseases.
- Adolescents who did not receive the two-dose series of measles-mumps-rubella vaccine (MMR) during childhood should receive this vaccine at their 11–12 year old check-up.

Adapted from the
Centers for Disease Control
and Prevention

STAFF CHANGES AT NHIP



Michael Dumond presents a gift to the staff of NHIP during his goodbye party.

On April 6, 2007, Michael Dumond, former program manager for NHIP, began his new position as Administrator for the Bureau of Prevention Services.

Jose Montero, State Epidemiologist, echoed the sentiments of the NHIP staff, “I have been working with Mike for several years, and he always impressed me as a personable, organized, methodical, thoughtful public health professional. He exercised a strong, low-key leadership and, under his guidance, we have seen continued growth and consolidation in NHIP. I am absolutely certain that he will do an incredible job in his new position. For obvious reasons, to see him go is difficult, but we are all happy for him and look forward to continue working with Mike in his new capacity.”

Paul Garrison, CDC consultant, will temporarily fill the position of Immunization Program Manager until a replacement for Mike is found. Paul began working with NHIP in October 2006. He came to New Hampshire from the Oklahoma State Department of Health where he served as Public Health Advisor on the management team at the Oklahoma State Immunization Service. Previously, Paul was with the National Immunization Program, Centers for Disease Control and Prevention (CDC) and was a consultant or program manager for the state health departments of Nevada, North Carolina, Maine and Virginia.

- Provides protection against HPV types 16 and 18 that cause 70% of cervical cancers and types 6 and 11 which cause 90% of genital warts.
- Licensed by the Food and Drug Administration (FDA).
- Will not treat existing HPV infections or their complications.
- Has shown no serious side effects. The most common side effect is brief soreness at the injection site.
- Does not contain thimerosal or mercury.
- Should not be given to pregnant women.
- Provides protection against four HPV types for at least five years. It is not known at this time if a booster will be necessary

For more information about GARDASIL® or HPV contact:

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Protecting Young Women from Cancers Caused by HPV

HPV (human papillomavirus) is a virus common in the United States and around the world and is the major cause of cervical cancer in women. The American Cancer Society estimates that in 2006, over 9,710 women in the U.S. were diagnosed with cervical cancer and 3,700 died from this disease. Every year, about 6.2 million people in the U.S. are infected with HPV, most commonly young women and men who are in their late teens and early 20s.

HPV is associated with several other types of cancer and causes precancerous genital lesions, and genital warts. Gardasil® is the first vaccine developed to prevent these diseases by protecting young women from some types of HPV.

HPV is spread by sexual contact and is the most common sexually transmitted infection in the US. At least 50% of sexually active people will become infected with HPV at some time in their lives. Condoms may reduce the risk of HPV infection, if used all the time and the right way. Ideally, HPV vaccine should be administered before onset of sexual activity, but sexually active females should still be vaccinated.

The New Hampshire Immunization Program (NHIP) will be supplying Gardasil® to providers for the immunization of young women age 11 through 18 (as funding and supply allows).



CERVICAL CANCER SCREENING

Cervical cancer screening is still recommended for those who have received this vaccine.

1. The vaccine will NOT provide protection against all types of HPV that cause cervical cancer, so women will still be at risk for some cancers. (There are 100 types of HPV.)
2. If a woman has already been infected with an HPV type included in the vaccine, the vaccine will not protect her from that HPV type.

ACIP RECOMMENDATIONS AND ADMINISTRATION

On June 29, 2006, the Advisory Committee on Immunization Practices (ACIP) voted to recommend Gardasil® be routinely given to females 9-26 years old. Administration of this vaccine requires three doses over a six-month period or longer. The first dose is recommended at the adolescent health visit between 11-12 years of age. The second dose should be given two months after the first dose. The third dose should be given at least six months after the first dose. HPV vaccine may be given with other vaccines. Girls 13-18 years of age should receive Gardasil® if they have not previously been vaccinated. NHIP does not provide vaccine for adolescents 19 years of age or older.



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